

### Ranking of Business-Work Processes

BUSINESS-WORK PROCESS	Room for Measurable Improvement (High, Medium, Low)								Impact Rank		I.T. Target	
	Quality of Public Health	Customer Satisfac.	Comply with Regs.	Finance Position	Staff Product	Info. Timeliness	Info. Quality	Lever	Room for Impr.	P.H. Missi on	Com -plex	IT “Fit”
1. Responding to Public Health Incidents	High	Medium	Medium	Medium	High	High	High	High	1 (32)	1 <sup>st</sup>	1 <sup>st</sup>	1 (20)
2. Documenting Service Delivery	Medium	Medium	Medium	Medium	High	High	High	High	2 (30)	1 <sup>st</sup>	1 <sup>st</sup>	1 (20)
3. Managing Billing/ Receivables	Low	Medium	Low	High	High	High	High	High	3 (27)	3 <sup>rd</sup>	3 <sup>rd</sup>	1 (20)
4. Measuring Outcomes	High	Medium	Low	Medium	Medium	High	High	High	3 (27)	1 <sup>st</sup>	1 <sup>st</sup>	4 (17)
5. Contract Mgmt. & Reporting	Low	Medium	Medium	High	High	High	Medium	High	3 (27)	2 <sup>nd</sup>	2 <sup>nd</sup>	4 (17)
6. Managing Individual Entity Encounters	Low	High	High	Low	High	High	Low	High	6 (25)	1 <sup>st</sup>	1 <sup>st</sup>	6 (15)
7. Organizing Group and Community Activities	Low	Medium	Low	Low	High	High	High	Low	9 (17)	2 <sup>nd</sup>	3 <sup>rd</sup>	6 (15)
8. Strategic Planning and Response - Resource Allocation	High	Medium	Medium	High	Medium	Medium	Medium	Medium	6 (25)	2 <sup>nd</sup>	2 <sup>nd</sup>	8 (10)
9. Organizing Information Requests	Medium	Medium	Low	Low	Medium	Medium	Medium	Medium	11 (15)	2 <sup>nd</sup>	3 <sup>rd</sup>	8 (10)
10. Managing Accounts Payable	Low	Medium	Low	Medium	Medium	Medium	Medium	Medium	11 (15)	3 <sup>rd</sup>	3 <sup>rd</sup>	8 (10)
11. Setting Public Policy	Medium	Medium	High	Medium	Low	Low	Low	High	9 (17)	1 <sup>st</sup>	2 <sup>nd</sup>	11 (5)
12. Implementing Business Policies & Procedure	Medium	High	High	Medium	Medium	Medium	Low	Low	8 (20)	3 <sup>rd</sup>	3 <sup>rd</sup>	11 (5)
13. Managing Payroll & Employee Benefits	Low	High	Medium	Low	Medium	Low	Low	Low	13 (10)	3 <sup>rd</sup>	3 <sup>rd</sup>	11 (5)

### Description of Measurable Improvement Categories:

The question to be answered is “How much room is there for measurable improvement in [this specific area -- see below] if something is done to speed up, streamline, integrate or otherwise change the business process? The response is High, Medium, Low along with specific descriptive information if the response is High or Medium.

1. Quality of Public Health: To what extent could the health of the population be improved? If high or medium, list the quality measure(s) that you would use and the level of change you anticipate.
2. Customer Satisfaction: To what extent will customer satisfaction be increased? If high or medium, identify the customer (patient, employee, Board of Health, etc.), the measure of satisfaction that you would use, and the level of change do you anticipate.
3. Compliance with Regulation or Mandate: To what extent are we not compliant with a current or likely Federal or State regulation or mandate? If high or medium, what regulation or mandate?
4. Financial Position: To what extent could revenues be increased, cash flow accelerated and/or non-staffing costs be decreased? If high or medium, describe improvement and the level of change do you anticipate.
5. Staff Productivity: To what extent could existing staff handle an increased volume of work, or could staff workload become more manageable? If high or medium, what staff & what work could be added/reduced and how much?
6. Information Timeliness: To what extent could information be made available quicker to someone(s) that is waiting for that information? If high or medium, what information, to whom, how much faster?
7. Information Quality: To what extent could the completeness and accuracy of information that is capture be improved? If high or medium, what information, where captured, what improvement?
8. Leverage: To what extent could this process be improved by changes to an “upstream” process or could changes to this process improve a “downstream” process? If high or medium, what process and what information

### Description of Ranking Categories:

#### **Impact Ranking:**

1. Room for Measurable Improvement (Room for Impr.): Answers the question, “Where would we get the most benefit from making a change in how the process works?”

A ‘1’ represents the most benefit. Lower numbers represent decreasing benefit. The ranking is based on the overall level of measurable improvement that is anticipated if a change is made to the process. This ranking is the relative ordering of the process based upon the summation of the anticipated room for improvement in each of the eight Categories of Measurable Improvement. (0 for Low, 2.5 for Medium and 5.0 for high).

2. Importance to Public Health Mission (P.H. Mission): Answers the question, “What is the level of importance of the process to the public health mission?”

1<sup>st</sup> tier processes are most important. This ranking is a subjective evaluation by the PHIT Steering Committee.

#### **Information Technology Target Ranking:**

1. Complexity (Complex): Answers the question, “How complex is this process?”

1<sup>st</sup> tier processes are the most complex, i.e. it may involve multiple staff, interacting with a lot of customers, across multiple locations, affecting multiple programs, with interactions with many other processes. This ranking is a subjective evaluation by the PHIT Steering Committee.

2. Information Technology Fit (IT Fit): Answers the question, ‘Are the measurable improvements likely to be achieved through the use of information technology?’

A ‘1’ represents a prime target. Lower numbers represent less likely targets. The ranking is based on the level of measurable improvement that is anticipated in the categories of Staff Productivity, Information Timeliness, Information Quality and Leverage. This ranking is the relative ordering of the process based upon the summation of the anticipated room for improvement in each of those four Categories of Measurable Improvement. (0 for Low, 2.5 for Medium and 5.0 for high).

### Description of Business-Work Processes

Process Name	Begins When . . .	Ends When . . .	Includes . . .	Comment
1. Responding to Public Health Incidents	A public health authority (state or local) receives a report of a suspected or confirmed violation, case or outbreak (Environmental Health or Communicable Disease).	Investigation is complete. Mitigating solutions are applied, and concerns of all potentially affected parties have been addressed.	Gathering information from reporter, identification of other sources of information and other cases. Investigation and mitigation and/or prophylaxis and/or treatment. Notification of specific groups or public if indicated. Coordination with other agencies. Reporting for surveillance. Development of the best mitigating solution.	
2. Documenting Service Delivery	Request for service is received or service is scheduled.	All files and records of the service are completed, or, if applicable, when the outcome of the service is known and documented.	Request for services, Triage for immediacy of need for service, Assignment to staff person, Review medical record, Schedule service, Print schedule or route slip, Print customized forms to guide service content and assist in documentation, Document service -- including catalog of actions taken in providing the service, as compared to a standard list or protocol for actions required to deliver the specified service, Reports produced for caseload management, supervisory oversight, management information and billing.	Services are to an individual person or facility.  This process includes both the act of documentation (for audit and training purposes) and the use of documentation standards/protocols to guide a staff person through correct service delivery.
3. Managing Billing/ Receivables	A client record is initiated.	Year-end reports are reconciled.	Initiating client records, Processing client contact or encounter form, Determining method for payment, Recognize A/R in revenue, Send out billing statement, <u>Record receipt and reduce receivables</u> , Reconcile information for year-	Laws and accepted accounting practices must be followed in managing revenues and expenditures. Budgets are adopted and/or modified by governing boards. Department management is responsible for following the adopted budget,

### Description of Business-Work Processes

Process Name	Begins When . . .	Ends When . . .	Includes . . .	Comment
			end report.	managing revenues and expenditures within laws and accepted accounting practices.
4. Measuring Outcomes	Desired program and/or operation outcomes are defined.	Identified outcome measures are utilized for 'next steps' planning or modification of existing practices.	Defining associated quantitative and qualitative measures and/or indicators, Defining collection methodologies for measures, Establishing measurement systems, Analyzing results from measurement systems, Forecasting future outcomes based on analysis, Reporting results of analysis and forecasts to decision-makers.	This process assumes that desired outcomes have already been defined. For example, a program targeted at reducing teen pregnancy would already have defined a desirable outcome, such as reducing teen pregnancies by X%. This process involves developing, tracking, analyzing and reporting the measures that help decision-makers determine whether desired outcomes are being obtained.  This process impacts each of the ten essential public health services.
5. Contract Mgmt. & Reporting	A recipient agency commits funds for a sub-recipient agency to undertake a specific program or set of services.	Funds have been expended and all performance measures have been reported to the recipient agency by the sub-recipient agency.	Definition of performance measures and data set formatting requirements, Definition of payment schedules, Contract signing, Payment, Performance measures recording by LHJ and reporting to DOH.	
6. Managing Individual Entity Encounters	A client is scheduled to present, or actually presents, at a LHJ facility or remote location. (This includes the interactions between the 16,000 drinking water entities and the public health system.)	All relevant information about encounter is complete and filed away.	Referral, Schedule Encounter, Registration, Record retrieval, Record filing, Communication and reporting of all relevant information.	Assume that <ul style="list-style-type: none"> <li>• The Documenting Service Delivery process handles care/service delivery and the documentation of that care/service</li> <li>• The Managing Billing/ Receivables process handles the billing of the</li> </ul>

### Description of Business-Work Processes

Process Name	Begins When . . .	Ends When . . .	Includes . . .	Comment
				<p>encounter/services</p> <ul style="list-style-type: none"> <li>Information will be exchanged between these three processes</li> <li>Encounter information must also be available for time/activities reporting and contract management</li> </ul>
7. Organizing Group and Community Activities	A need or request for group or community activity is identified.	Group or activity is no longer needed. All documentation has been completed and reports produced.	Identify and define needs (what is to be accomplished ), Organize and schedule events & places, Obtain sustaining funding, Document event, Produce reports, Evaluate to make sure getting what is needed from group or activity	Services are not to an individual person or facility, but to groups or communities. Reporting may be by type of service, kind of group or specific community served, or by contractor who is paying for the service.
8. Strategic Planning and Response - Resource Allocation	An event occurs that requires a review, allocation, or redirection of agency resources (equipment, staff, money etc.).	Issue or situation addressed or resolved	<ul style="list-style-type: none"> <li>Evaluation of request, challenge and/or opportunity</li> <li>Proper forwarding of request to agency decision makers,</li> <li>Assess impact and propose recommendation. Cost benefit analysis</li> <li>Budget review, Management review, Board of Health review, Review of mission and agency goals against request/proposed allocation,</li> <li>Assignment (or reassignment) of staff duties/work</li> <li>Redirection of agency resources to address issue</li> <li>Identifying program impacts,</li> </ul>	The focus of this work-process is determining how to allocate resources in response to planned for and unanticipated events. Operational management of, and accounting for, resources is assumed to be incorporated within other business-work processes. For example, inventory management of consumables is addressed within the Managing Accounts Payable Process

### Description of Business-Work Processes

Process Name	Begins When . . .	Ends When . . .	Includes . . .	Comment
			Identifying program needs, <ul style="list-style-type: none"> <li>Update accounting system with new (or reduced) dollar figures to reflect resource changes.</li> </ul>	
9. Organizing Information Requests	A need or request for information is identified.	A response is prepared and sent. Information is provided in understandable and needed form. Information about the event is documented and filed in a manner that allows easy retrieval.	Proper forwarding of information requests, Evaluation of request, Attention to confidentiality requirements and policies around request, Acquiring information needed, Allocation of staff time to respond to request, Analyzing data, Education about what information is being provided and what it means, Interpretation of information, Communication with community partners.	
10. Managing Accounts Payable	A requisition for an item, purchase order, or voucher is initiated - whichever comes first.	Year-end reports are completed.	Requisition, Purchase order, Placement of order, <u>Receipting of goods</u> , Vouchering for payment, Paying vendor, Reconciliation of transactions to budget.	One great value is being able to show budget authority.  Laws and accepted accounting practices must be followed in managing revenues and expenditures. Budgets are adopted and/or modified by governing boards. Department management is responsible for following the adopted budget, managing revenues and expenditures within laws and accepted accounting practices.
11. Setting Public Policy	An issue of public health importance cannot be managed effectively by existing policies,	When the policy, law or regulation is modified, created, enacted, and signed by the	Defining the problem, the scope of hindrance, and the scope of the proposed solution.	

### Description of Business-Work Processes

Process Name	Begins When . . .	Ends When . . .	Includes . . .	Comment
	laws or regulations.	policy authority (Board of Health, Board of County Commissioners, Department Administration, or through legislative action) to allow for more effective public health response.	Stakeholder interaction, facilitation, moderation, and mediation. Qualitative and quantitative data is considered in support of policy.	
12. Implementing Business Policies & Procedure	A change in Public Policy is complete, or an operational incident points to the need for additional or clarified policies and procedures.	When operational policy or procedure is created and implemented, appropriately documented and filed, and staff is fully trained in use of the policy/procedure.	Meeting with stakeholders, Problem identification, Determination of appropriate solution, Creation of new/revised operational policy or procedure, Revision & approval, Communication, Training of staff in the use of new/revised operational policy or procedure.	A “library of policies” would be helpful, as a resource for developing standard practices
13. Managing Payroll & Employee Benefits	Position is identified to fill business need (permanent, temporary, internship) or regulations outlining salaries and benefits change.	All information is distributed to appropriate parties and signed documents are processed and filed away (by LHJ or DOH staff)	Defining compensation, job description, employment policies and practices, HR activities, Benefits packages.  Gathering information needed for workforce planning and/or management decisions.  Ongoing tasks of time accounting and completion of the reports for payroll	



<b>BUSINESS- WORK PROCESS</b>	<b>Quality of Public Health</b>	<b>Customer Satisfaction</b>	<b>Comply with Regulations</b>	<b>Financial Positioning</b>	<b>Staff Productivity</b>	<b>Information Timeliness</b>	<b>Information Quality</b>	<b>Leverage</b>
1. Responding to Public Health Incidents	<b>Reduce duration, morbidity, and spread of public health incidents</b>	Increased customer satisfaction as measured on survey	Improved reporting of notifiable conditions	Budgetary impacts	<b>Increased focus on investigation and less on paperwork</b>	<b>Speed of data collection and analysis. Increased and faster sharing of information.</b>	<b>Case report efforts corrected immediately (before filing).</b>	<b>Improves service documentatio n, outcome measurement , helps with resource management. Improves state and national surveillance systems.</b>
2. Documenting Service Delivery	By ensuring that staff follow standard protocols, quality of services will be improved. Measure by determining percent of clients who receive services according to standard protocols.	Contractors would express greater satisfaction with reports received. Customers would express greater satisfaction with service. Measure by customer & contractor satisfaction surveys.	Standard protocols can incorporate any regulatory or contract requirements, improving collection of information needed for compliance.	Decreased payback due to audit findings because of inadequate documentation	<b>Increased number of services per provider due to decreased time required for documentation</b>	<b>Decreased lag between date of service and date of data entry making information more readily available to other providers serving the family.</b>	<b>Standard protocols = all staff collecting the same kind of information in the same format. Structured documentation makes information easier to find in the chart and improves report capabilities</b>	<b>Many “downstream ” DOH programs require data reported either in aggregate (ConCon reports) or by individual (CHIF). Measure = number of contracts using reports from this system.</b>
3. Managing Billing/ Receivables		Minimize client wait times for paperwork.		<b>Faster turnaround on receivables. Allows for billing sooner</b>	<b>Minimize paper work and only deal with minimum</b>	<b>Allows for single entry or minimum re- entry.</b>	<b>Reduces coding errors, add summaries properly, can audit</b>	<b>Get data from Managing Individual Entity</b>

<b>BUSINESS- WORK PROCESS</b>	<b>Quality of Public Health</b>	<b>Customer Satisfaction</b>	<b>Comply with Regulations</b>	<b>Financial Positioning</b>	<b>Staff Productivity</b>	<b>Information Timeliness</b>	<b>Information Quality</b>	<b>Leverage</b>
				<b>and tracks better.</b>	<b>entry/re-entry.</b>		<b>transactions more easily.</b>	<b>Encounters</b>
4. Measuring Outcomes	<b>Timely and accurate reporting of interventions, programs, and strategies that will provide optimal planning and targeting of efforts and resources.</b>	Improved management information for program staff, managers, administration , Boards of Health, and general community.		Strengthening reporting helps justify expenditures and strengthens grant opportunities and grant payment turnaround.	Improved outcome information will reduce planning times, increase efficiencies, and allow for better staffing.	<b>Measuring and capturing data so we move through programs and processes more effectively enhance timeliness. Feedback is then immediate.</b>	<b>Accurate reflection is best done with ongoing input only being done once. Entry errors are minimized.</b>	<b>Quality, high value data can be used for improved supervision, management, planning and evaluation. These translate to useful data for other to use.</b>
5. Contract Mgmt. & Reporting		Easier for LHJs to report against contracts	Ability to complete all federal and legislative required reports	<b>Improved cash flow through better management of funds.</b>	<b>Reduced time per report. Increased information for programs, administrators , policymakers</b>	<b>More timely reporting of performance measures</b>	More accurate information on performance measures and related expenditures	<b>Flow of information between Managing Encounters and Documenting Service Delivery</b>
6. Managing Individual Entity Encounters		<b>Improve information delivery times to customers</b>	<b>HIPAA Privacy Regulation, Partner Notification, Contact Management</b>		<b>Automates routine manual processes</b>	<b>Information would be available as soon as it is needed by providers</b>		<b>Provide data to documenting service delivery, billing/ receivables, time/ activities reporting, contract management</b>

<b>BUSINESS- WORK PROCESS</b>	<b>Quality of Public Health</b>	<b>Customer Satisfaction</b>	<b>Comply with Regulations</b>	<b>Financial Positioning</b>	<b>Staff Productivity</b>	<b>Information Timeliness</b>	<b>Information Quality</b>	<b>Leverage</b>
7. Organizing Group and Community Activities		Community and participants indicate that programs and activities meet their needs. Contractors would express greater satisfaction with reports received where applicable.			<b>Increased number of 'events' per provider because decreased time required for documentation</b>	<b>Speed of availability of reports for management purposes</b>	<b>Increased information that described what and how many community activities are being done and for what public health purpose. Less duplication of information across systems</b>	
8. Strategic Planning and Response - Resource Allocation	<b>Improved allocation of resources to priority public health issues</b>	Improved due to staffing allocation that meets demands	Demonstration of regulatory responsibilities	<b>Maximization of resources to prioritized health issues</b>	Staff duties/job description correlate with prioritized needs	Increased responsiveness to auditors that request information about agency resources	Completeness and accuracy of information that describes agency actions and/or responses	Resource allocations can be more quickly adjusted
9. Organizing Information Requests	Plans and policies will more accurately reflect public health needs, based upon assessments to those needs. (Information requests are an indicator of the needs of a community.)	Increased number of requests for public health information			Staff can focus on complex requests and can direct customers to web-based resources for simple data requests. Improvements will benefit from standards for information collection, processing, and	Information requests can be turned around faster	Information can be more focused at the community level. Accuracy and completeness can be improved through staff training and quality control checks on source systems.	This process draws information from other sources and processes. The quality of this information is of critical importance.

BUSINESS- WORK PROCESS	Quality of Public Health	Customer Satisfaction	Comply with Regulations	Financial Positioning	Staff Productivity	Information Timeliness	Information Quality	Leverage
					release.  *See environmental condition			
10. Managing Accounts Payable				More timely reporting to grantors to access funds more quickly, e.g., consolidated contracts.	Single entry for information, automated postings, easier to provide reporting.	Reports easier to be up to date, reply more accurately to vendors.	Reduces coding errors, adds summaries accurately, can audit transactions more easily.	
11. Setting Public Policy	Health Outcome measures that relate to particular health policy issue	Increased customer satisfaction as measured on survey	<b>Improvements as measured by internal QA Reviews</b>	Budgetary impacts				
12. Implementin g Business Policies & Procedure	Effects on the health status of the population the policy affected.	<b>Increased customer satisfaction as measured on survey</b>	<b>Improves audit evaluations. Complies with HIPAA requirements</b>	Increased budget or cost recovery.	Less time spent comparing policies and making changes	Speed of revision and sharing of new policies		
13. Managing Payroll & Employee Benefits		<b>Increased processed times for payroll and personnel transactions.</b>	Address audit findings					

#### Environmental Conditions:

1. Organizing Information Requests: The allocation of additional staff is critical to achieving these improvements